

Historic Preservation Commission attackers

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APPLICATION FOR	and a leave wise
HISTORIC AREA WORK PERMIT	6 6 6 (C. 8 No. (3)
TAX ACCOUNT #	
NAME OF PROPERTY OWNER _ JEFE _ L. MISEN	TELEPHONE NO. (301) 977-7094
ADDRESS Sathusbury mad	(Include Area Code)
CONTRACTOR	TELEPHONE NO.
PLANS PREPARED BY CONTRACTOR REGISTRAT	IDN NUMBER TELEPHONE NO
REGISTRATION NUMBER	(Include Area Code)
LOCATION OF BUILDING/PREMISE	There is a family the same of the same
House Number - 8820 Street Huntman	ster Road
Town/City Barthers Surger, Marine to El	ection District ! 1 10 10 10 10 10 10 10 10 10 10 10 10 1
Nearest Cross Street BRINK PD.	
Lot an I this Block Tol gothed Subdivision 11 60 SHE	10000 Leven 10 December 10 10 10 10 10 10 10 10 10 10 10 10 10
Liber Folio Parcel Parcel Parcel	55 a. 7137 133
1A. TYPE OF PERMIT ACTION: (circle one) Construct Extend/Add Alter/Renovate Repair Wreck/Raze Move Install Revocable F15 Revision	Circle One: A/C Slab Room Addition Porch Deck Fireplace Shed Solar Woodburning Stove OHEROU Fence/Wall (complete Section 4) Other Tenders Roeu WORKSIMMOD MORTANHER 199 OHOT. O
18. CONSTRUCTION COSTS ESTIMATE \$ \(\sum_{\infty} \subseteq \colon \) 1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE 1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY 1E. IS THIS PROPERTY A HISTORICAL SITE? \(\subseteq \text{YES} \)	PERMIT SEE PERMIT # Comment
	\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.
PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADD 2A. TYPE OF SEWAGE DISPOSAL	2B. TYPE DF WATER SUPPLY
01 () WSSC 02 () Septic	01 () WSSC 02 () Well
03 () Other	03 () Dther
PART THREE: COMPLETE ONLY FOR FENCE/RETAINING WALL	
4A. HEIGHTfeetinches 4B. Indicate whether the fence or retaining wall is to be constructed on or	ne of the following locations:
1. On party line/Property line	
Entirely on land of owner Do public right of way/easement	(Revocable Letter Required).
	on, that the application is correct, and that the construction will comply with
plans approved by all agencies listed and I hareby acknowledge and accept this	
() A Nh	17 VOV 86
Signature of owner or authorized agent (agent must have signature notarized	
APPROVED ———— For Chairperson, Historic Pres	ervation Commission
	were the control of t
DISAPPROVED Signature	Date
APPLICATION/PERMIT ND: 19186	FILING FEE:\$
DATE ISSUED:	PERMIT FEE: \$BALANCE \$
OWNERSHIP CODE:	RECEIPT NO: FEE WAIVED:

THE FOLLOW APPLICATION (C)			OMPLETED			OCUMICOS	MUST ACC	OMPANY	, inio
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		See 4-							
ATTACH TO THIS									
drives, walks, fences, PHOTOGRAPHS OF			existing) and	J/or ARCHITE	CIUKAL D	KAWINGS (rioor plans,	elevations,	. etc.).
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